

Name of Person Filing Document:
Your Address:
Your City, State, Zip Code:
Your Telephone Number:
Attorney Bar Number (if applicable):

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Case Number JD: _____

DEPENDENCY PETITION

Child(ren)'s Name
Person(s) under the age of 18

1. INFORMATION ABOUT ME, the Petitioner:

My Name: _____

My Address: _____

My Telephone Number: _____
Home Work Message

My relationship to the child(ren): _____

I am a fit and proper person to care for the child(ren).

2. INFORMATION ABOUT THE CHILD(REN):

Child's Name	Birthdate	Sex	Address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. INFORMATION ABOUT THE PARENTS OR CURRENT LEGAL GUARDIANS OF THE CHILD(REN):

Name:	Relationship to Child:	Address:
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. CHILD'S CURRENT LIVING ARRANGEMENT.

A. The child(ren) is/are currently living with:

Name:	Relationship to Child:	Address:
_____	_____	_____
_____	_____	_____

B. The child(ren) has/have been living there since (give approximate date): _____

C. The child is now living in the State of Arizona, Maricopa County. ☐ Yes or ☐ No.

5. CHILD IS DEPENDENT. The Petitioner believes the child(ren) is/are dependent within the provisions of ARS 8-201.11, in that the child(ren) is/are in need of proper and effective parental care and control and has no parent or guardian willing to exercise or capable of exercising such care and control, or whose home is unfit by reason of abuse, neglect, cruelty, or depravity, as stated below:

A. The mother is unable or incapable of providing care for the child for the following reasons **(provide specifics)**:

- B. The father is unable or incapable of providing care for the child for the following reasons
(provide specifics):

6. **PERSONS WITH KNOWLEDGE ABOUT THE ALLEGATIONS.** The following persons can be contacted concerning the above allegations:

Name	Address	Telephone	Relationship
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
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7. **DOCUMENTS.** Attached are the following documents which support the statements made:

A.

B.

C.

D.

E.

RELIEF REQUESTED: This is what I want the court to do:

- A. Based upon the foregoing allegations, immediate action is required and therefore the child(ren) should be made a temporary ward of the Court committed to the care, custody, and control of the Arizona Department of Economic Security with temporary physical custody to be placed in the Petitioner(s) who should be authorized to sign for medical treatment. The Arizona Department of Economic Security may be authorized to consent for out-of-state travel within the United States for up to thirty days.
- B. The parents should be ordered to pay a reasonable sum to the Arizona Department of Economic Security for the care, maintenance, and support of the child(ren) should the child(ren) be placed in a foster home or institutional care.

- C. That the Court set an initial dependency hearing on this Petition in front of a judicial officer.
- D. Petitioner further requests that, after hearing this matter, this Court adjudicates the child(ren) dependent and this Court enter such judgment and orders for commitment, custody, care and support, or such other relief for the child(ren)'s welfare.

OATH AND VERIFICATION

I verify that the facts contained in the Petition are true and correct to the best of my information and belief.

Petitioner's Signature

SUBSCRIBED AND SWORN TO before me this date: _____
(Month, Day, Year)

Notary Public

OR

Michael Jeanes, Clerk by: Deputy Clerk

My Commission Expires: